

## Acute respiratory infections

Week 8 (19 to 25 February 2024). Publication: 28 February 2024

NATIONAL EDITION

### This week's trends

**Acute respiratory infections (ARI).** Decrease in indicators in general practice and in hospitals.

**Influenza.** Continued decrease in all indicators in general practice and hospitals in mainland France with circulation of influenza viruses still very active.

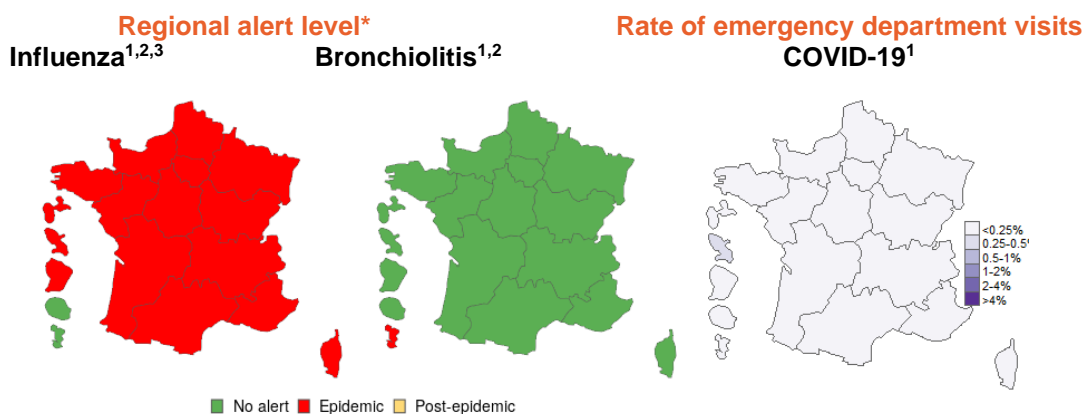
**Bronchiolitis.** Mayotte remains in epidemic phase. All other regions are at baseline levels.

**COVID-19.** All indicators at low levels.

### Key indicators

#### Syndromic indicators

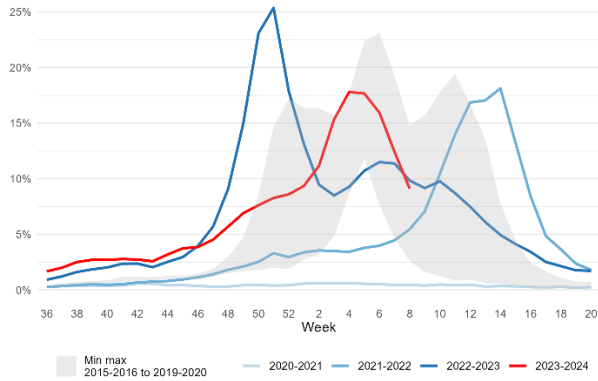
Share of pathology among	Lower ARI*		Influenza		Bronchiolitis (<2 years)		COVID-19:	
	W08	W08 vs W07	W08	W08 vs W07	W08	W08 vs W07	W08	W08 vs W07
SOS Médecins consultations	17.5%	-2.8 pts	9.1%	-3.3 pts	4.1%	+0.1 pts	0.4%	-0.1 pts
Emergency department visits (OSCOUR®)	4.8%	-0.9 pts	1.4%	-0.7 pts	7.4%	-0.1 pts	0.1%	0 pts
Admissions post-emergency department visit (OSCOUR®)	8.7%	-0.9 pts	1.5%	-0.7 pts	14.6%	-0.4 pts	0.3%	-0.1 pts



\* Methodology explained in the [appendix](#). French Antilles: W07 alert level. Source: <sup>1</sup> OSCOUR® network, <sup>2</sup> SOS Médecins, <sup>3</sup> Sentinelles network

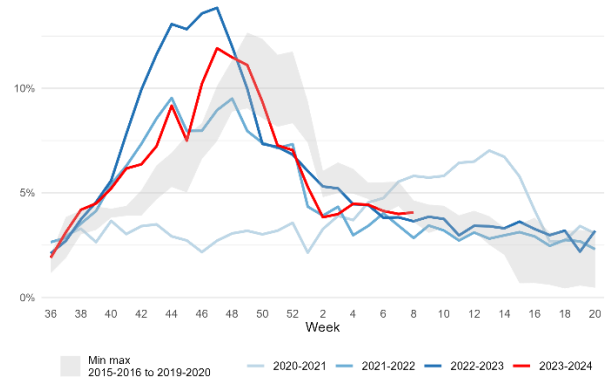
Read the [regional bulletins](#) (French only) by Santé publique France for the epidemiological situation in each region.

### Share of influenza-like illness among SOS Médecins consultations



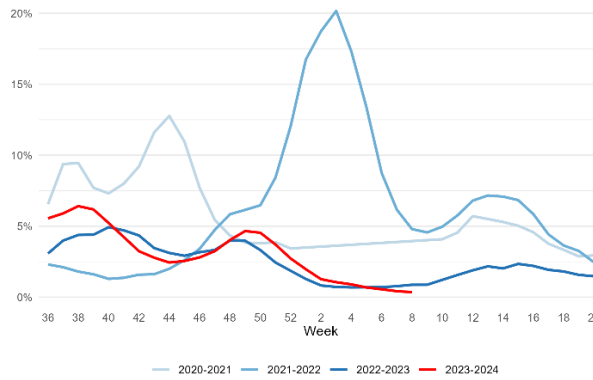
Source: SOS Médecins

### Share of bronchiolitis among SOS Médecins consultations for children under 2 years



Source: SOS Médecins

### Share of suspected COVID-19 among SOS Médecins consultations



Source: SOS Médecins

## Virological indicators

Positivity rate of samples	Influenza viruses		RSV		SARS-CoV-2	
	W08	W08 vs W07	W08	W08 vs W07	W08	W08 vs W07
General practice (Sentinelles network, National Reference Centres)	32.3%	-17.1 pts	1.1%	+1.1 pts	0%	-2.4 pts
Hospitals (RENAL network, National Reference Centres)	10.0%	-4.7 pts	1.0%	-0.1 pts	3.1%	-0.8 pts

#### SARS-CoV-2

	W08	W08 vs W07
Positivity rate of tests in medical laboratories	3.1%	-0.5 pts
Wastewater surveillance (SUM'Eau)*	1,256	-26.8%

\* Ratio of SARS-CoV-2 viral concentration to ammoniacal nitrogen concentration. Methodology explained in the [appendix](#)

Read the bulletin by the [Sentinelles network](#) (in English) for the epidemiological situation in general practice.

## Situation update

**In week 8, indicators for acute respiratory infections continued to decrease in both general practice and hospital settings. In mainland France, the influenza epidemic continued and there was a sharp fall in indicators for the second week in a row. However, the circulation of influenza viruses remained at a high level. The majority of COVID-19 indicators remained at low levels, reflecting moderate circulation of SARS-CoV-2. With regard to bronchiolitis, the epidemic was over in all regions of mainland and overseas France, except for Mayotte, where the epidemic continued. Against this epidemiological backdrop, and in addition to vaccination against COVID-19 and influenza, the systematic use of protective measures by all remains important in crowded places or in the presence of people at risk, particularly wearing a mask if symptomatic.**

The influenza epidemic continued in mainland France but all indicators were still decreasing sharply in general practice and hospitals, in all age groups. In general practice, the share of SOS Médecins activity accounted for by influenza-like illness was at a low level for all ages and in all age groups. In hospitals, the proportion of admissions post-emergency department visit decreased this week, from a moderate to a low level across all ages and in every age group except the over-65s. In the French overseas departments and regions, French Guiana, Guadeloupe and Martinique remained in the epidemic phase.

For bronchiolitis in mainland France, indicators in all regions had returned to baseline levels. In the French overseas departments and regions, Mayotte remained in the epidemic phase.

Syndromic and virological indicators of COVID-19 were declining or stable at low levels. The positivity rate decreased in general practice and in hospitals. In wastewater, detection of SARS-CoV-2 was also at a low level.

In long-term care facilities (care homes), the number of ARI clusters reported has been stable at a moderate level since the beginning of January. The share of clusters due to influenza has accounted for the majority since mid-January (week 2). Due to the potentially severe impact of ARI on vulnerable individuals, specific monitoring of this indicator remains in place.

At the end of week 8, COVID-19 vaccination coverage within the autumn 2023 campaign among people aged 65+ was 30.2% (21.6% of 65–69 year-olds, 27.4% of 70–74 year-olds, 36.0% of 75–79 year-olds and 36.9% of 80+ year-olds). Since 17 October 2023, 29.1% of COVID-19 vaccines administered to people aged 65+ have been carried out at the same time as an influenza vaccine.

In the current context, and in addition to vaccination against COVID-19 and influenza, the systematic use of protective measures remains essential, particularly wearing a mask if symptomatic in crowded places or in the presence of people at risk, as well as frequent hand washing and airing of interiors. These measures remain an effective way of protecting against respiratory infections and their complications by limiting the risk of transmitting viruses to close contacts, particularly people at risk.

## About this bulletin

This weekly bulletin provides key syndromic and virological indicators for acute respiratory infections (ARI) with an overview of recent epidemiological trends in the French territories (mainland and overseas). Santé publique France, the French public health agency, produces these indicators to help monitor COVID-19, influenza and bronchiolitis on a grouped or specific basis, and to better estimate their burden and impact on the healthcare system. The English version is an extract from the *Bulletin des infections respiratoires aiguës*, which contains further indicators, graphs and analysis based on data gathered through France's integrated ARI surveillance system.

## Partners

Santé publique France acknowledges the large public health network that contributes to the surveillance of acute respiratory infections: healthcare professionals working in private practice and hospitals, emergency departments, hospital and private biology laboratories, learned societies for infectious diseases, resuscitation and emergency medicine, CNAM, INSERM, and INSEE.

### For more information (French only)

Integrated ARI surveillance

Surveillance of influenza, bronchiolitis and COVID-19

SurSaUD<sup>®</sup> syndromic surveillance

Surveillance in long-term care facilities

Surveillance in general practice: Sentinelles Network (INSERM - Sorbonne University)

Virological surveillance (National Reference Centre for Viral Respiratory Infections)

Genomic surveillance: Variant risk analysis

Regional trends: see Regional Bulletins

Open data indicators: Géodes, data.gouv.fr

## Editorial team

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The team would like to thank the Infectious Diseases Division, the Regions Division, the Data Support, Processing and Analysis Division, and the Prevention and Health Promotion Division for their contributions.

Citation: Acute Respiratory Infections Bulletin. National edition. Week 8 (19 to 25 February 2024). Saint-Maurice: Santé publique France, 4p. Director of publication: Caroline Semaille. Date of publication: 28 February 2024

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